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Bib Data Sheet

CONFIRMATION NO. 7406

SERIAL NUMBER 10/697,484	FILING DATE 10/29/2003 RULE	CLASS 455	GROUP ART UNIT 2617	ATTORNEY DOCKET NO. LUC-436/Florkey 11-4
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APPLICANTS

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** CONTINUING DATA ***** *None* ******* FOREIGN APPLICATIONS ***** *None* *****

IF REQUIRED, FOREIGN FILING LICENSE GRANTED

** 01/30/2004

Foreign Priority claimed 35 USC 119 (a-d) conditions met Verified and Acknowledged	<input type="checkbox"/> yes <input checked="" type="checkbox"/> no <input type="checkbox"/> yes <input checked="" type="checkbox"/> no <input type="checkbox"/> Met after Allowance Examiner's Signature <i>an</i> Initials <i>27</i>	STATE OR COUNTRY IL	SHEETS DRAWING 2	TOTAL CLAIMS 20	INDEPENDENT CLAIMS 3
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ADDRESS

32205
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TITLE

Employment of established telephone number of mobile device supported by serving mobile switching center to connect a call to the mobile device

FILING FEE RECEIVED 970	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:	<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees (Filing) <input type="checkbox"/> 1.17 Fees (Processing Ext. of time) <input type="checkbox"/> 1.18 Fees (Issue) <input type="checkbox"/> Other _____
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